

Name: Patient name

ID num. : XXXX XXXX XXXX XXXX

Contact Num.: XXXXXXXXXXXXXXXX

Adress : XXXXXXXXXXX,XXXX,XXXX



Emergency Help



Add Health State



Ask Form Doctor

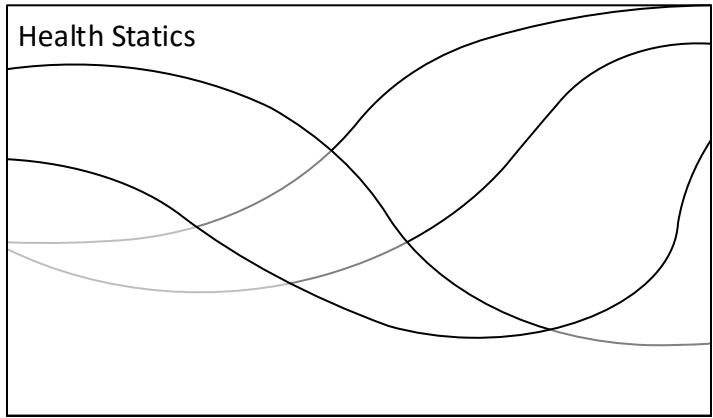


Contact Doctors

Notifications

Event Calender:

April 16						
M	T	W	T	F	S	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	



Servisers



View Reports



Open a new report



Get A Report

Comment on health status

Save

Exit

Emergency Help

⌵

Select Hospital

⌵

Select a Doctor

Request Ambulance



Priority Level

☒ HIGH

☐ Medium

☐ Low

Description

Request

Exit

Select Doctor Name

Ask From Doctor Chat Box

Send

Exit

Health Reports

Report 1

Report 2

Report 3

X-Ray Reports

Report 1

Report 2

Report 3

Blood Reports

Report 1

Report 2

Report 3

Other Reports

Report 1

Report 2

Report 3

Back